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JAN 16 2008

COMMISSION
ON ETHICS

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS) (Amended)

(Please read the instructions before completing.)

PERSONAL INFORMATION:

NAME: <u>Jeffrey Fontaine</u>	LENGTH OF RESIDENCE IN NEVADA: <u>20 years and 6 months</u>
ADDRESS: <u>400 Bunker Hill Drive</u>	
CITY, STATE, ZIP: <u>Carson City, NV 89703</u>	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)):
TELEPHONE: <u>775-883-9648</u>	E-MAIL: <u>jfontaine@nvnaco.org</u>

SECTION A (Public Office): List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- **ANNUAL** all elected and appointed public officers (no later than Jan. 15 each year)
- **CANDIDATE** (no later than the 10th day after the last day to qualify as a candidate)
- **APPOINTMENT** to fill unexpired term of an elected or appointed public officer (within 30 days)

Public Office	Elected, Appointed or Appointed to Elective (E, A or A/E)	Annual Compensation	Term or Date Appointed	ANNUAL NRS 281A.600.1(b) 281A.610.1(b)	CANDIDATE NRS 281A.610.1(a)	APPOINTMENT NRS 281A.600.1(a)
<u>Director, Nevada Department of Transportation</u>	<u>A</u>	<u>\$ 110,000</u>	<u>6/03 to 1/07</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION B (Sources of Income): List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

	Self	Household Member
<u>Executive Director, Nevada Association of Counties</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Director, Nevada Department of Transportation</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Hartford Deferred Compensation</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Wachovia Bank, Imperial Bank, Bank of America</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SECTION C (Real Property): List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281A.620.1(c)]:

Specific Location	Particular Use
<u>131 Lake Glen, Carson City, NV 89703</u>	<u>Mother's residence</u>

Print Name of Public Officer

SECTION D (Creditors): List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on real property which is not required to be listed in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

	Self	Household Member
<u>None</u>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

SECTION E (Gifts): List the identity of donor and value of each gift of all gifts received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [EXCEPT: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281A.620.1(e)]:

Donor	Gift	Value of Gift
<u>None</u>		\$
_____		\$
_____		\$
_____		\$

SECTION F (Business Entities): List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281A.620.1(f)]:

	Self	Household Member
<u>None</u>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 1-16-08**FILE COMPLETED FORM WITH:**

Appointed Public Officers
Nevada Commission on Ethics
3476 Executive Pointe Way, Suite 10
Carson City, Nevada 89706
775.687.5469 • 775.687.1279 fax

Signature: Jeffrey FontainePrint name: Jeffrey Fontaine

Elected Public Officers and Candidates for Public Office
Nevada Secretary of State, Elections Division
101 North Carson Street, Suite 3
Carson City, Nevada 89701
775.684.5705 • 775.684.5718 fax

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